



Complete Summary

GUIDELINE TITLE

Procedure guideline for telenuclear medicine.

BIBLIOGRAPHIC SOURCE(S)

Parker JA, Wallis JW, Jadvar H, Christian P, Todd-Pokropek A. Procedure guideline for telenuclear medicine, 3.0. Reston (VA): Society of Nuclear Medicine; 2002 Jun 15. 4 p. [6 references]

GUIDELINE STATUS

This is the current release of the guideline.

COMPLETE SUMMARY CONTENT

SCOPE

METHODOLOGY - including Rating Scheme and Cost Analysis

RECOMMENDATIONS

EVIDENCE SUPPORTING THE RECOMMENDATIONS

BENEFITS/HARMS OF IMPLEMENTING THE GUIDELINE RECOMMENDATIONS

QUALIFYING STATEMENTS

IMPLEMENTATION OF THE GUIDELINE

INSTITUTE OF MEDICINE (IOM) NATIONAL HEALTHCARE QUALITY REPORT

CATEGORIES

IDENTIFYING INFORMATION AND AVAILABILITY

DISCLAIMER

SCOPE

DISEASE/CONDITION(S)

Conditions for which nuclear interpretation and consultation are indicated

GUIDELINE CATEGORY

Management

CLINICAL SPECIALTY

Nuclear Medicine

Radiology

INTENDED USERS

Allied Health Personnel
Physicians

GUIDELINE OBJECTIVE(S)

To assist nuclear medicine practitioners in using telenuclear medicine for interpretation and consultation of nuclear medicine studies

TARGET POPULATION

Persons undergoing nuclear medicine studies

INTERVENTIONS AND PRACTICES CONSIDERED

Telenuclear medicine (i.e., nuclear medicine interpretation or consultation at a location distant from that at which the data is acquired)

MAJOR OUTCOMES CONSIDERED

Not stated

METHODOLOGY

METHODS USED TO COLLECT/SELECT EVIDENCE

Hand-searches of Published Literature (Primary Sources)
Hand-searches of Published Literature (Secondary Sources)
Searches of Electronic Databases

DESCRIPTION OF METHODS USED TO COLLECT/SELECT THE EVIDENCE

Literature searches were performed. In addition, references known to experts and references from the nuclear medicine community were considered.

NUMBER OF SOURCE DOCUMENTS

Not stated

METHODS USED TO ASSESS THE QUALITY AND STRENGTH OF THE EVIDENCE

Not stated

RATING SCHEME FOR THE STRENGTH OF THE EVIDENCE

Not applicable

METHODS USED TO ANALYZE THE EVIDENCE

Review

DESCRIPTION OF THE METHODS USED TO ANALYZE THE EVIDENCE

Not stated

METHODS USED TO FORMULATE THE RECOMMENDATIONS

Expert Consensus

DESCRIPTION OF METHODS USED TO FORMULATE THE RECOMMENDATIONS

Drafts of the guideline were submitted to members of the Guideline Development subcommittee (methodologists) and the Task Force (subject experts). These reviewers indicated on a line-by-line basis any suggestions or recommendations for the revision of the guideline. The percentage of agreement for all reviewers was calculated for each revision and compiled by the Society of Nuclear Medicine (SNM) central office. It is expected that the percentage of agreement will increase with each revision.

RATING SCHEME FOR THE STRENGTH OF THE RECOMMENDATIONS

Not applicable

COST ANALYSIS

A formal cost analysis was not performed and published cost analyses were not reviewed.

METHOD OF GUIDELINE VALIDATION

Internal Peer Review

DESCRIPTION OF METHOD OF GUIDELINE VALIDATION

When the Task Force and Guideline Development Subcommittee completed their edits, draft procedure guidelines were distributed to the Society of Nuclear Medicine (SNM) Sample Review Group for comment. (The SNM Sample Review Group is a cross-section of approximately 100 nuclear medicine practitioners representing every field of specialization).

The guideline was approved June 15th, 2002 by the SNM Commission on Health Care Policy, the Board of Directors, and the House of Delegates.

RECOMMENDATIONS

MAJOR RECOMMENDATIONS

Background Information and Definitions

Telenuclear medicine refers to nuclear medicine interpretation or consultation at a location distant from that at which the data is acquired. There is a continuum of separation between the physical location of the acquisition and interpretation, but telenuclear medicine is meant to imply that the interpretation is relatively remote as compared with the typical interpretation.

Because telenuclear medicine may allow more timely interpretation and facilitate consultation, it can provide improved health care. For example, it may enable increased availability of nuclear medicine in underserved areas. New uses for this evolving technology are likely to emerge.

Telenuclear medicine equipment is used to implement telenuclear medicine. The same equipment may be used for both onsite and telenuclear medicine. This guideline will focus on special considerations when nuclear medicine equipment is used at remote locations. Distribution of images in a single imaging center falls into the realm of picture archiving and communication systems (PACS) and is not the major focus of this document.

Common Indications

- A. To interpret routine studies at a remote location
- B. To interpret emergency studies in an on-call setting
- C. To provide consultation

Procedure

The detailed procedure recommendations in the guideline address the following areas: types of telenuclear medicine systems, data completeness, data visualization, processing, digitization, communications, compression, monitor quality control, and security.

CLINICAL ALGORITHM(S)

None provided

EVIDENCE SUPPORTING THE RECOMMENDATIONS

TYPE OF EVIDENCE SUPPORTING THE RECOMMENDATIONS

The type of evidence supporting the recommendations is not specifically stated.

BENEFITS/HARMS OF IMPLEMENTING THE GUIDELINE RECOMMENDATIONS

POTENTIAL BENEFITS

Because telenuclear medicine may allow more timely interpretation and facilitate consultation, it can provide improved health care. For example, it may enable increased availability of nuclear medicine in underserved areas.

POTENTIAL HARMS

Not stated

QUALIFYING STATEMENTS

QUALIFYING STATEMENTS

- The Society of Nuclear Medicine has written and approved guidelines to promote the cost-effective use of high-quality nuclear medicine procedures. These generic recommendations cannot be applied to all patients in all practice settings. The guidelines should not be deemed inclusive of all proper procedures or exclusive of other procedures reasonably directed to obtaining the same results. The spectrum of patients seen in a specialized practice setting may be quite different from the spectrum of patients seen in a more general practice setting. The appropriateness of a procedure will depend, in part, on the prevalence of disease in the patient population. In addition, the resources available to care for patients may vary greatly from one medical facility to another. For these reasons, guidelines cannot be rigidly applied.
- Advances in medicine occur at a rapid rate. The date of a guideline should always be considered in determining its current applicability.

IMPLEMENTATION OF THE GUIDELINE

DESCRIPTION OF IMPLEMENTATION STRATEGY

An implementation strategy was not provided.

INSTITUTE OF MEDICINE (IOM) NATIONAL HEALTHCARE QUALITY REPORT CATEGORIES

IOM CARE NEED

Getting Better
Living with Illness

IOM DOMAIN

Effectiveness

IDENTIFYING INFORMATION AND AVAILABILITY

BIBLIOGRAPHIC SOURCE(S)

Parker JA, Wallis JW, Jadvar H, Christian P, Todd-Pokropek A. Procedure guideline for telenuclear medicine, 3.0. Reston (VA): Society of Nuclear Medicine; 2002 Jun 15. 4 p. [6 references]

ADAPTATION

Not applicable: The guideline was not adapted from another source.

DATE RELEASED

2002 Jun 15

GUIDELINE DEVELOPER(S)

Society of Nuclear Medicine, Inc - Medical Specialty Society

SOURCE(S) OF FUNDING

Society of Nuclear Medicine (SNM)

GUIDELINE COMMITTEE

Task Force

COMPOSITION OF GROUP THAT AUTHORED THE GUIDELINE

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FINANCIAL DISCLOSURES/CONFLICTS OF INTEREST

Not stated

GUIDELINE STATUS

This is the current release of the guideline.

GUIDELINE AVAILABILITY

Electronic copies: Available from the [Society of Nuclear Medicine \(SNM\) Web site](#).

Print copies: Available from SNM, Division of Health Care Policy, 1850 Samuel Morse Dr, Reston, VA 20190-5316; Phone: 1-800-513-6853 or 1-703-326-1186; Fax: 703-708-9015; E-Mail: ServiceCenter@snm.org.

AVAILABILITY OF COMPANION DOCUMENTS

The following are available:

- Society of Nuclear Medicine. Procedure guideline for guideline development. Reston (VA): Society of Nuclear Medicine; 2001 Jun (version 3.0). Electronic copies: Available from the [Society of Nuclear Medicine Web site](#).

- Society of Nuclear Medicine. Performance and responsibility guidelines for NMT. Reston (VA): Society of Nuclear Medicine; 2003. Electronic copies: Available from the [Society of Nuclear Medicine Web site](#).

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PATIENT RESOURCES

None available

NGC STATUS

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Date Modified: 9/25/2006